| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET | Application Number 09/393,590 | Filing Date 09 September, 1999 | ☐ To be Mailed |
| Substitute for Form PTO-1360 (For use with Form PTO/SB/06) | Applicant(s) MOYER ET AL. | | Page 1 of 1 |

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT 12/13/2006		AFTER SEC. AMENDMENT		CLAIMS	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1				51		2				
2							52		2				
3							53		2				
4				1			54		1				
5				1			55		1				
6							56						
7							57						
8				1			58						
9				1			59						
10				1			60						
11				1			61						
12				1			62						
13				1			63						
14				1			64						
15							65						
16			1				66						
17							67						
18							68						
19							69						
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22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29				2			79						
30				2			80						
31				2			81						
32				2			82						
33				2			83						
34				2			84						
35				2			85						
36				2			86						
37				2			87						
38				2			88						
39				2			89						
40							90						
41							91						
42				2			92						
43				2			93						
44				2			94						
45				2			95						
46				2			96						
47				2			97						
48							98						
49				2			99						
50				2			100						
Total Indep							Total Indep	2					
Total Depend							Total Depend		53				
Total Claims							Total Claims	55					